

MARYLAND STATUTORY FORM LIMITED POWER OF ATTORNEY

PLEASE READ CAREFULLY

This power of attorney authorizes another person (your agent) to make decisions concerning your property for you (the principal). You need not give to your agent all the authorities listed below and may give the agent only those limited powers that you specifically indicate. This power of attorney gives your agent the right to make limited decisions for you. You should very carefully weigh your decision as to what powers you give your agent. Your agent will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself.

If you choose to make a grant of limited authority, you should check the boxes that identify the specific authorization you choose to give your agent.

This power of attorney does not authorize the agent to make health care decisions for you.

You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent's authority will continue until you die or revoke the power of attorney or the agent resigns or is unable to act for you.

Your agent is not entitled to compensation unless you indicate otherwise in the special instructions of this power of attorney. If you indicate that your agent is to receive compensation, your agent is entitled to reasonable compensation or compensation as specified in the Special Instructions.

This form provides for designation of one agent. If you wish to name more than one agent you may name a coagent in the Special Instructions. Coagents are not required to act together unless you include that requirement in the Special Instructions.

If your agent is unavailable or unwilling to act for you, your power of attorney will end unless you have named a successor agent. You may also name a second successor agent.

This power of attorney becomes effective immediately unless you state otherwise in the Special Instructions.

If you have questions about the power of attorney or the authority you are granting to your agent, you should seek legal advice before signing this form.

DESIGNATION OF AGENT

I, Inna Golfand, name the following person as my agent:
(Name of Principal)

Name of

Agent: Jacob Kogan

Agent's

Address: 5409 Spindrift pl., Columbia, MD 21045

Agent's Telephone

Number: 443 231 8497

GRANT OF GENERAL AUTHORITY

I Inna Golfand ("the principal") grant my agent and any successor agent, with respect to each subject that I choose below, the authority to do all acts that I could do to:

- (1) Demand, receive, and obtain by litigation or otherwise, money or another thing of value to which the principal is, may become, or claims to be entitled, and conserve, invest, disburse, or use anything so received or obtained for the purposes intended;
- (2) Contract with another person, on terms agreeable to the agent, to accomplish a purpose of a transaction and perform, rescind, cancel, terminate, reform, restate, release, or modify the contract or another contract made by or on behalf of the principal;
- (3) Execute, acknowledge, seal, deliver, file, or record any instrument or communication the agent considers desirable to accomplish a purpose of a transaction, including creating a schedule contemporaneously or at a later time listing some or all of the principal's property and attaching the schedule to this power of attorney;
- (4) Initiate, participate in, submit to alternative dispute resolution, settle, oppose, or propose or accept a compromise with respect to a claim existing in favor of or against the principal or intervene in litigation relating to the claim;
- (5) Seek on the principal's behalf the assistance of a court or other governmental agency to carry out an act authorized in this power of attorney;
- (6) Engage, compensate, and discharge an attorney, accountant, discretionary investment manager, expert witness, or other advisor;
- (7) Prepare, execute, and file a record, report, or other document to safeguard or promote the principal's interest under a statute or regulation;
- (8) Communicate with representatives or employees of a government or governmental subdivision, agency, or instrumentality, on behalf of the principal;
- (9) Access communications intended for, and communicate on behalf of the principal, whether by mail, electronic transmission, telephone, or other means; and
- (10) Do lawful acts with respect to the subject and all property related to the subject.
- (11) This Power of Attorney shall not be affected by the subsequent disability or incapacity of the Principal.

(INITIAL each authority in any subject you want to include in the agent's general authority. Cross through each authority in any subject that you want to exclude. If you wish to grant general authority over an entire subject, you may initial "All of the above" instead of initialing each authority.)

SUBJECTS AND AUTHORITY

A. Real Property - With respect to this category, I authorize my agent to:

(AS) to execute and deliver all documents necessary to manage, lease, repair and otherwise care for the property known as **204 Cork Lane, #203, Reisterstown, MD 21136**, said documents to include, but not limited to the any and all documents and instruments, including, but not limited to, contracts, leases, warranties, affidavits, agreements, and other materials

related in any way to the management, leasing and care of the property known by the street address of **204 Cork Lane, #203, Reisterstown, MD 21136.**

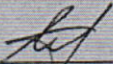
LIMITATION ON AGENT'S AUTHORITY

An agent that is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

EFFECTIVE DATE

This power of attorney, appointing Jacob Kogan as my agent, is effective immediately.

SIGNATURE AND ACKNOWLEDGMENT


Your Signature (Principal)
Inna Golfand
Your Name Printed (Principal)

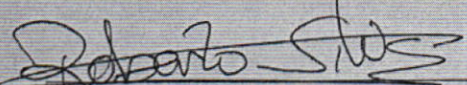
02/15/19
Date

Your Address (Principal)

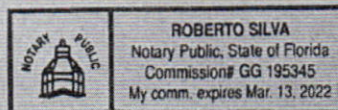
Your Telephone Number (Principal)

STATE OF Florida, COUNTY OF Broward

This document was acknowledged before me on 2-15-2019 (Date)
by Inna Golfand (Name of Principal).


Signature of Notary
My commission expires: 3/13/2022

(Seal, if any)



WITNESS ATTESTATION

The foregoing power of attorney was, on the date written above, published and declared by Inna Golfand (Name of Principal) in our presence to be her power of attorney. We, in her presence and at her request, and in the presence of each other, have attested to the same and have signed our names as attesting witnesses.

Witness #1 Signature

SERGEY KHOREV

Witness #1 Name Printed

1830 S Ocean Dr, Apt 2708
Hallandale Beach FL 33009

Witness #1 Address

+1 (954) 937-5951

Witness #1 Telephone Number

Witness #2 Signature

Annick Timmar

Witness #2 Name Printed

3900 S Ocean Dr
Hollywood, FL 33019

Witness #2 Address

954-4553597

Witness #2 Telephone Number

The foregoing power of attorney executed by Inna Golfand, was prepared by:

EMERALD BAY ESCROW SERVICES, LLC
4 PARK CENTER COURT, SUITE 200A, OWINGS
MILLS, MD 21117

IMPORTANT INFORMATION FOR AGENT

Agent's Duties

When you accept the authority granted under this power of attorney, a special legal relationship is created between you and the principal. This relationship imposes on you legal duties that continue until you resign or the power of attorney is terminated or revoked. You must:

- (1) Do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest;
- (2) Act with care, competence, and diligence for the best interest of the principal;
- (3) Do nothing beyond the authority granted in this power of attorney; and
- (4) Disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

(Principal's Name)

by

(Your Signature) as Agent

Unless the Special Instructions in this power of attorney state otherwise, you must also:

- (1) Act loyally for the principal's benefit;

MD CODE, ESTATES & TRUSTS ARTICLE § 17-203
STATUTORY FORM LIMITED POWER OF ATTORNEY.

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